PATENT APPLICATION FEE DETERMINATION RECORD								Application or Docket Number				
	PAIENIA		Effective October 1, 1992									
CLAIMS AS FILED - PART I								ALL E	NTITY	OR	OTHER T	
(Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA								ATE	FEE		RATE	FEE
100											٠	·
BASIC FEE									\$355.00	OR		\$710.00
TOTA	L CLAIMS	4	minus 20 =			. 23		11=		OR	x\$22=	50
INDE	PENDENT CLA	IMS 2	minus 3 =			1.2				OR	x 74=	146
MULTIPLE DEPENDENT CLAIM PRESENT							15=		OR	+230=	33C	
• If the difference in column 1 is less then zero, enter "0" in column 2 TOTAL OR TOTAL										TOTAL	70	
<i>'</i>					ENDED - PART II (Column 2) (Column 3)			IALL E	ENTITY	OR	OTHER T	
_		(Column 1)		<u> </u>		(COMMINIO)	7		4551			400:
4		CLAIMS REMAINING		NU	SHEST JMBER	PRESENT	R	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL
EN		AFTER AMENDMENT			VIOUSLY ID FOR	EXTRA			FEE		***	FEE
DM	Total	• 44	Minus	**	43	=	x\$	11=	-	OR	x\$22=	
AMENDMENT	Independent	• • • • • • • • • • • • • • • • • • • •	Minus	***	5	= /	×	37=		OR OR	x 74=	74.00
A	FIRST PRE	SENTATION OF A	NULTIPLE DE	PENDI	ENT CLAIM		┨┠┰	115=		OR	+230=	K-Z-X-
								OTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)						ADDIT.	FEE		l Al	DDIT. FEE	
8		CLAIMS REMAINING			GHEST JMBER	PRESENT	\prod_{R}	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT		AFTER AMENDMENT			VIOUSLY ID FOR	EXTRA			FEE		, - , , .	FEE
	Total	• (/2-	Minus	**	110		x\$	11=		OR	x\$22=	
EN	Total	. 47		***	77	=	╂┞┰	37=		OR	x 74=	
AM	Independent	6	Minus	<u> </u>	6	Ľ	41-			OR		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							نا ل	15=		OR	+ 230=	
	(Column 1) (Column 2) (Column 3)							T. FEE		OR	DDIT. FEE	
		CLAIMS			SHEST				ADDI-			ADDI-
S T		REMAINING AFTER			UMBER VIOUSLY	PRESENT EXTRA	A P	ATE	TIONAL FEE		RATE	TIONAL FEE
Æ		AMENDMENT		-	ID FOR		┨┝			QR		
AMENDMENT	Total	. 18	Minus	**	40	= 0	┨┠─	11=		OR	x\$22=	
ME	Independent	(0	Minus	***	b	= 0	×	37=		OR	x 74=	
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							15=		OR	+230=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL OR TOTAL ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ADDIT, FEE ADDIT, FEE												
	a. a.e	mber Previously P mber Previously P nber Previously Pa	aid Ear IN TI	492 2IL	ACF is loss th	an 3 enter "3".						
П	ne "Highest Nun	nder Previously Pa	io For (lotal	or inde	epenoent) is t	io ingriosi riulli	26, 100110	010	appropriate t			